Appendix C

CASEWORKER SERVICE NEED AND AVAILABILITY SURVEY

Appendix C

Mississippi Department of Human Services
Division of Family and Children Services
Data Collection Work Groups

Procedure Guide

I. Introduction

The Mississippi Department of Human Services (MDHS) requested the assistance of the Child Welfare League of America (CWLA) in assessing policies, procedures, organizational structure, caseload, workflow, and case management issues with a view toward enhanced capacity to serve children and families. During the past several months CWLA has reviewed policy documents and conducted a workload analysis. In order to establish more detailed knowledge of the MDHS child welfare system, specifically the Division of Family and Children Services (DFCS), it is essential to gather information from staff that has direct influence on service delivery to children and families. Several methods have been identified to gather information relevant to this goal. Focus groups with caseworkers and supervisors will be conducted, as well as group interviews with Regional Directors. The other method of information gathering is through DFCS work groups. This document provides a description of DFCS work groups, their role and responsibility, and procedures for gathering information

DFCS Work Group Structure

Regional Directors have lead responsibility for collecting information from staff in their districts. The Regional Director's role is that of coordinator of information gathering activities. Area Social Work Supervisors, using tools developed by CWLA, will be asked to work directly with staff that has access to case records and other related documents.

Area of Focus: Service Delivery

The assessment of service needs, identification of relevant services, monitoring of service utilization, and the creation of a pool of services are critical to the achievement of desired child and family outcomes. The information that the work groups will gather will focus on service selection, availability, and accessibility. Area Social Work Supervisors will coordinate the gathering of information from their randomly selected sample of foster care staff.

The following topic areas will be explored:

- Placement,
- Mental health,
- Substance abuse,
- Parenting/family skills building, and
- Support services

CWLA consultants will conduct analysis of collected data.

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Area of Focus: Case Planning

Case plans serve as blueprints for service delivery. Ideally, they are based on a comprehensive family and child assessment. Additionally case plans should be developed with the participation of the family, age-appropriate children, relevant family members and other professionals, as appropriate. The case plan identifies goals and objectives for services and expected outcomes, including the permanency goal. Regional Directors and Area Social Work Supervisors are asked to randomly select a 10 percent sample of foster care cases in their respective regions. The issues to be explored include:

> Child and family assessments
> Initial placement decisions
> Case plan development
> Permanency plan identification
> Subsequent placement decisions
> Re-evaluation of permanency plans

The most recent case plan from each of the cases in the 10 percent sample will be forwarded to the CWLA consultants for review and analysis.

Use of Collected Data and Information

Information and data gathered through the processes of staff case surveys and case plan review will be included in a larger report providing a general overview and assessment of the DFCS child welfare system. The information that specific individuals provide will be used in a final report to DFCS. However, individual responses will not be noted specifically, but will become part of a larger pool of data.

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Division of Family and Children Services

Staff Foster Care Case Survey Instrument

<u>**Instructions:**</u>
The Area Social Work Supervisor in collaboration with selected caseworkers should use this document to gather information. Responses should be recorded on the instrument using the prompts for each question. One copy of this instrument should be maintained with the District Director and the original forwarded to CWLA. Responses to the questions should be based on the caseworker's knowledge of the families and children in their caseload.

Section 1.0 Demographic Information

1.1 County: _____

1.2 District _____

1.3 Supervisor   _____

1.4 Caseworker _____

1.5 Number of assigned foster care cases   _____

1.6 Survey Date _____
             m/d/y

Section 2.0 Placement Resources

In what type of placements are children in your caseload? *Check all that apply and indicate the number of children beside each type of placement.*
  ❑ Family foster home (long-term)   _____
  ❑ Emergency family foster home   _____
  ❑ Group home   _____
  ❑ Residential treatment   _____
  ❑ Independent living   _____
  ❑ Kinship care home/relative placement_____
  ❑ Hospital   _____
  ❑ Shelter   _____
  ❑ Other (Please specify)   _____

What are the top three factors that influence the selection of a placement resource?
  ❑ Documented assessment of the child's needs

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❑ Documented family assessment
❑ Location of resource
❑ Resource availability
❑ Court order for specific placements
❑ External reports of documented need
❑ Other (Please specify)   _____

How do you determine the level of service? Please explain.

_____
_____
_____
_____
_____
_____

When children have required a change in placement, what have been the primary reasons? *Check no more than two options*.
❑ Move to a less restrictive setting (e.g. residential treatment to foster home setting)
❑ Placement with a relative
❑ Custody to a relative
❑ Placement in a juvenile justice setting
❑ Runaway behavior
❑ Behavioral management issues
❑ Caregiver or placement facility request
❑ Child's request
❑ Move to independent living
❑ Other (please specify)   _____

From your experience, check three of the most frequently needed placement resources. *Check no more than three*.
❑ Family foster homes (long-term)
❑ Emergency family foster homes
❑ Adoptive family homes
❑ Group homes
❑ Residential treatment
❑ Independent living
❑ Other (Please specify)   _____

How frequently do you have to choose an alternative placement because the optimal choice for a child is not available? *Select one option.*
Never
Sometimes, but not frequently
Frequently (50% or more of the time)
Cannot estimate/no answer

How often do you have to place a child farther from his family and community than you would like because a closer placement is not available?

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Check only one option
Never
Some time, but not frequently
Frequently (50% or more of the time)
Cannot estimate/no answer
Other (Please specify) _____

Section 3.0 Mental Health Services

What mental health service is most frequently requested? *Choose no more than three options.*
Psychological assessment or testing
Psychotherapy
Family therapy
Individual therapy
Group therapy
Psychiatric examination
Psychiatric hospitalization
Behavior modification
Counseling
Other (Please specify) _____

To what degree are the most frequently requested services available in the location of children or families? Available means that the service exists and can be secured within the time needed.
Readily available
Somewhat available
Not available
Other (Please explain) _____

If the most frequently requested services that you identified in 3.1 are available, are they accessible to children and families? Accessible means that the service can be easily reached.
Yes
No
Not sure
Other (Please explain)_____

What mental health services would you like to see more of for children and families?
Check no more than three options.
Psychological assessment or testing
Psychotherapy
Family therapy
Individual therapy
Group therapy
Psychiatric examination
Psychiatric hospitalization

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Behavior modification
Residential treatment
Counseling
Other (Please specify) _____

Section 4.0 Substance Abuse

4.1   What is the most frequently requested service related to substance abuse? **Choose no more than three options.**
Screening (child)
Screening (adult)
Assessment (child)
Assessment (adult)
Out-patient treatment (adult)
Out-patient treatment (child)
In-patient treatment (adult)
In-patient treatment (child)
Other (Please specify) _____

4.2   To what degree are the most frequently requested services available in the location of children or families? Available means that the service exists.
Readily available
Somewhat available
Not available
Other (Please explain) _____

4.3   If the most frequently requested services that you identified in 4.1 are available, are they accessible to children and families? Accessible means that the service can be easily reached.
Yes
No
Not sure
Other (Please explain)_____

4.4   What substance abuse services would you like to see more of for children and families? *Check no more than three options.*
Screening (child)
Screening (adult)
Assessment (child)
Assessment (adult)
Out-patient treatment (adult)
Out-patient treatment (child)
In-patient treatment (adult)
In-patient treatment (child)
Other (Please specify) _____

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5.0 Physical and Dental Health Services

5.1   What barriers exist in obtaining medical examinations or assessments for children? *Check no more than three barriers*
        Availability of resources
        Accessibility of resources
        Delays due to waiting lists
        Financial or insurance availability
        Transportation
        No barriers exist
        Other (Please specify)   _____

5.2   What barriers exist in obtaining medical treatment for children when a condition has been diagnosed? *Check no more than three barriers.*
        Availability of resources
        Accessibility of resources
        Delays due to waiting lists
        Financial or insurance availability
        Transportation
        Parental consent
        Need for court order in absence of parental consent
        No barriers exist
        Other (Please specify)   _____

5.3   What barriers exist in obtaining dental assessments or examinations for children?
        Check no more than three barriers.
        Availability of resources
        Accessibility of resources
        Delays due to waiting lists
        Financial or insurance availability
        Transportation
        No barriers exist
        Other (Please specify)   _____

5.4   What barriers exist in obtaining dental treatment for children when a condition has been diagnosed? *Check no more than three barriers.*
        Availability of resources
        Accessibility of resources
        Delays due to waiting lists
        Financial or insurance availability
        Transportation
        Parental consent
        Court order in absence of parental consent
        No barriers exist
        Other (Please specify)   _____

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6.0 Parenting Skills

6.1   Of the foster care cases, in how many of the families was parenting/family skill building identified as a need? *Check only one option.*
        (fill in the number) _____
        Unable to determine
        None
        Other (Please explain) _____

6.2   What area of parenting skill building is most frequently identified as a need? *Check the top three.*
            Discipline
            Understanding age-appropriate behavior
            Setting limits
            Building child self esteem
            Understanding child development
            Advocacy
            Safety and nurturing of young children
            Creating child-friendly environments
            Not applicable, the need was not identified in any cases
            Other (Please specify)   _____

6.3   To what degree are programs available to address the most frequently identified area of need in the location of the parent? Available means that the service or program exists.
        Readily available
        Somewhat available
        Not available
        Other (Please explain) _____

6.4   If programs are available to address the areas of needs that you identified in 6.2, are they accessible to parents? Accessible means that the program can be easily reached.
Yes
No
Not sure
Other (Please explain)_____

6.5   What areas of parenting skill building would you like to see more available for parents? *Check no more than three options.*
            Discipline
            Understanding age-appropriate behavior
            Setting limits
            Building child self esteem
            Understanding child development
            Advocacy
            Safety and nurturing of young children
            Creating child-friendly environments
            Not applicable, no opinion

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Other (Please specify)   _____

6.6   What factors do you consider in determining successful completion of a parenting program or service? **Check all that apply.**
     Attendance
     Level of participation
     Observed transfer of learning
     Parent feedback
     Progress reports from the program
     Other (Please specify)   _____

6.7   Of the factors listed in 6.6 what do you consider the most important? *Check no more than two.*
     Attendance
     Level of participation
     Observed transfer of learning
     Parent feedback
     Progress reports from the program
     Other (Please specify)   _____

7.0 Support Services

7.1   Based on your experience with your current cases, what support services do families most frequently request?
     Transportation to services
     Transportation for family visits
     Homemaker
     Advocacy with other systems (e.g. health and education)
     Other (Please specify)   _____

7.2   Which services are available to families? **Check all that apply.**
     Transportation to services
     Transportation for family visits
     Homemaker
     Advocacy with other systems (e.g. health and education)
     Other (Please specify)   _____

7.3   Does your office have Social Work Aides?
     Yes
     No
     Do not know

7.4   How do you and Social Work Aides coordinate case information when you share the same case? *Please describe.*
     _____
     _____
     _____

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_____
_____
_____
_____

7.5   Is there anything else that you would like to share concerning placements and services?

_____
_____
_____
_____
_____

Thank you for taking the time to participate in this survey and sharing your experience.

Appendix D

CASEWORKER AND SUPERVISOR FOCUS GROUP INTERVIEW GUIDES

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**Mississippi Department of Human Services
Division of Family and Children Services**

Focus Group Registration Form

1. **Name** _____ **(optional)**

2. **Male** _____   **Female** _____

3. **Job Title/Position**
   Caseworker   ____
   Area Social Work Supervisor ____

4. **Which of the following describes you? Check all that apply.**
   I work directly with children and families   ____
   I recruit and train resource families   ____
   I license resource family homes   ____
   I supervise caseworkers who plan and deliver services   ____
   Other (Write in)   _____

5. **Years of education**
   BSW   ___
   Other bachelor's degree ___
   MSW   ___
   Other master's degree   ___
   Other (Please specify)   ___
   _____

6. **Years with the agency**
   Less than one year   ___
   One year   ___
   Two to five years   ___
   Six to ten years   ___
   More than ten years   ___

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**Mississippi Department of Human Services
Division of Family and Children Services**

Focus Group

Statement of Informed Consent

I, _____, agree to participate in this focus group being conducted by _____from the child Welfare League of America (CWLA). CWLA has been retained by the Department of Human Services to conduct this study.

The purpose of the study is to gain insight into factors that influence how children in out-of-home care and their families receive services through the Division of Family and Children Services.

I understand that:
> The focus group will last no more than two and one half hours.
> My participation is voluntary and that if I wish to leave I may do so at any time without giving a reason or explanation.
> My withdrawal from the group, if I choose to do so, will have no affect on my relationship with DFCS.
> The facilitators will take notes. These materials will be kept confidential.
> Names of individuals in the focus group will be kept confidential.
> A report summarizing the results of this and other focus groups will be presented to DFCS management. Participant names will not be used in the report.
> It is expected that I will not repeat anything heard during this group, outside the group.

The CWLA facilitators have offered to answer questions that I have about the focus group and what I am expected to do.

I have read and understand this information and I agree to take part in this focus group.

_____   _____
Today's Date   Your Signature

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Mississippi Department of Human Services
Division of Family and Children Services

Focus Group

Facilitator Agenda

Welcome and Introductions
   Welcome group and thank them for their presence.
   Introduction of facilitator and recorder.
   Participant introductions

Purpose and Topic Overview
   Review purpose statement (gather information to increase understanding)
   Review general issues (resources, permanency, caseloads, supports)

Provide Guidelines
   Notes will be taken during the session.
   Anonymity is guaranteed in the recording, analysis, and reporting of the results.
   There are no wrong answers, just different points of view.
   Free to address remarks to each other, not just the facilitator.
   One person speaks at a time.
   Facilitator's role is to ask questions and listen.

Questioning Period
   List questions here
Summary
   Brief summary of main points
   Group comments, amendments, corrections

Closure
   Anything missed?
   Questions from the participants
   Information concerning feedback (e.g. how results will be shared)
   Thank you to participants

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Mississippi Department of Human Services
Division of Family and Children Services

Focus Group

Participant Agenda

Welcome and Introductions

Purpose and Topic Overview

Guidelines

Questioning Period

Summary Discussion

Wrap Up

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Mississippi Department of Human Services
Division of Family and Children Services

Focus Group Questions and Reporting Form
Foster Care Social Workers

Focus Group Information

Date of Focus Group	
Location of Focus Group	
Number and Description of Participants	
Facilitator	
Recorder	

Responses to Questions

Q 1: What factors are considered in selecting shelter care as a placement option for a child.

Summary/Key Points	Notable Quotes

Comments/Observations

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Q2: How are decisions made about the selection of other placements?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 3: How are the service needs of children and families determined?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 4: Describe how you develop Individual Service Plans.

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 5: What barriers exist that prevent or delay the provision of identified services for children and families?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 6: To what extent is concurrent planning practiced? If it is not practice, why not?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 7: What can DFCS do to more consistently achieve safe and timely permanency for children?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 8: From your perspective, are caseloads too high? If so, what factors do you believe influence high caseloads?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 9: What additional supports would be useful to you in carrying out your job?

Summary/Key Points	Notable Quotes

Comments/Observations

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Focus Group Questions and Reporting Form
Area Social Work Supervisors

Focus Group Information

Date of Focus Group	
Location of Focus Group	
Number and Description of Participants	
Facilitator	
Recorder	

Responses to Questions

Q 1: Describe your role in the supervision of caseworkers.

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 2: What barriers exist in the recruitment and retention of staff?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 3: From your perspective, are caseloads too high? If so, what factors are responsible?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 4: How are service needs of children and families determined?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 5: What barriers exist that prevent or delay the provision of identified services for children and families?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 6: What can DFCS do to more consistently achieve safe and timely permanency for children in out-of-home care?

Summary/Key Points	Notable Quotes

Comments/Observations

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Q 7: What additional supports would be useful to you in carrying out your job?

Summary/Key Points	Notable Quotes

Comments/Observations

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3.0 Administrative Supports[*]

3.1   Describe the supports, including data and management tools, that you receive from the state office?

3.2   What supports, including data and management tools from the state office would be useful to you in carrying out your job?

3.3   What would you describe as agency strengths?

3.4   What would you describe as areas of need?

Thank you for taking the time to discuss these issues.

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[*] An administrative support refers to assistance and guidance to Regional Offices by the State Office.

Appendix E

CONSULTANT VITAS

Appendix E

CURRICULUM VITA
December 2005

Name: Sue Duvall Steib

Address: 25125 Bickham Road
                       Jackson, Louisiana 70748

Phone: (225) 654-9347

Current Position: Director, Research to Practice
                       Child Welfare League of America
                       440 First Street NW, Third Floor
                       Washington, DC 20001

Education

Ph.D.:   Social Work: Social policy and research; Minor: Educational Research
              Louisiana State University, 2001

MSW: Major: Administration; community organization
              Louisiana State University, 1983.

BA: Major: Sociology
              Louisiana State University, 1970.

Licensure & Certifications

- Licensed Clinical Social Worker, License #2227
- Board Approved Supervisor, Louisiana Board of Certified Social Work Examiners
- Academy of Certified Social Workers

Professional Affiliations, Appointments & Awards

- Catholic Community Services Adoption Advisory Board, Baton Rouge, Louisiana, 2001-2004
- Distinguished Alumni Award, Louisiana State University School of Social Work, 2004
- Louisiana Law Institute, Children's Code Advisory Committee, 2000 to present
- Louisiana Children's Cabinet, Comprehensive Planning Advisory Committee, 1999-2000
- National Association of Social Workers
- Society for Social Work and Research

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Sue D. Steib, page 2

Professional Experience

Child Welfare League of America

September 2001 to present
Director of Research to Practice

CWLA's Research to Practice (R2P) initiative endeavors to bridge the gap between the research and practice communities by conducting systematic reviews of the empirical literature across the broad spectrum of child welfare and related fields, and synthesizing this information, along with its implications for practice and policy, into a format easily accessed by practice professionals. R2P prepares annotated bibliographies and research briefs on key topics related to child welfare practice, conducts workshops on evidence-based practices at the conferences of CWLA and other human services organizations throughout the country, and provides on-site consultation and technical assistance to agencies undertaking evidence-based practice change.

Louisiana Department of Social Services, Office of Community Services:

Child Welfare Program Director
November, 1997 to September, 2001

Responsible for direction of planning, budgeting, resource and policy development, for the public child welfare programs in Louisiana. Served as primary legislative liaison for the agency in child welfare program issues. Supervised the administrators of the child protection, family services, foster care, and adoption programs who, along with 14 subordinate professional staff, provided functional supervision to approximately 1100 caseworkers, supervisors, and regional level staff throughout the state.

Administrator, Foster Care and Adoption
May 1991 to November, 1997

Responsible for the planning and management of a budget of over $60,000,000 annually, policy and program development. Duties included negotiation and management of contracts, coordination with other public and private agencies, provision of clinical consultation to field staff in exceptionally difficult cases, and review and analysis of legislation affecting services to children and families. Directly supervised three support staff and six masters level social workers assigned to program management.

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Sue D. Steib, page 3

Administrator, Child Protection and Family Services
February, 1987 to May, 1991

Responsible for the planning and management of a budget of approximately $9,000,000 and development of programs, policy, and resources. Duties included negotiation and monitoring of contracts with private service providers, provision of clinical consultation in referred cases, provision of input concerning legislation, coordination with other public and private agencies. Supervised a staff of five masters level social workers assigned to program management and two support staff.

Social Services Supervisor
May, 1980 to February, 1987

Supervised casework staff (bachelors and masters level) providing assessment, counseling and case management services to families to address issues of child maltreatment and family conflict and in placement decision making and attainment of permanency for children in foster care. Included direct counseling with families in problem solving and case planning, relinquishment of parental rights, dependency and child custody and permanency issues. Work with the legal system included preparation of cases and provision of testimony in matters of child custody, placement, development of permanent plans for children in foster care, and termination of parental rights.

Caseworker
August,1970 to May,1980

Provided casework services to children and families in child protection, child welfare home-based services, foster care, and adoption.

Presentations & Publications

Presentations in Evidence-Based Practice:

Strengths-Based, Family-Centered Practice: Applying the Evidence. Child Welfare Professional Development Academy, Norfolk State University, Norfolk, VA., December, 13-14, 2005.

The Child Welfare Workforce: What Research Does (and Doesn't) Tell Us About Recruitment and Retention. Child Welfare Workforce Development and Workplace Enhancement Institute: Knowledge Development and Application, U.S. Children's Bureau, Arlington, VA, October 24, 2005.

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Effective Interventions in Child Maltreatment. American Professional Society on the Abuse of Children, National Colloquium, New Orleans, LA., June 17, 2005.

Chronic Neglect: Leveraging What We Know to Keep Children Safe. National Conference on Child Abuse & Neglect, Boston, MA, April 20, 2005..

Evidence-Based Practice: What is it and What Does it Really Mean for Agencies and Practitioners? Child Welfare League of America National Conference, Washington, DC, March 11, 2005.

Using What We Know: Making Research Work for Kids & Families. Child Welfare League of America National Conference, February 28, 2004.

Evidence-Based Practice Across the Continuum: Engagement & Assessment of Families. Child Welfare League of America National Conference, Washington, DC, February 29, 2004.

Evidence-Based Practice Across the Continuum: Working with Siblings. Child Welfare League of America National Conference, Washington, DC, February 29, 2004..

Bringing Research to Life in Child Welfare. Workshop presentation at the Society for Social Work and Research National Conference, New Orleans, LA, January 19, 2004

Using Evidence to Make Practice Decisions in Tough Times. National Council of Juvenile and Family Court Judges National Symposium, Kansas City, MO, September 16, 2003.

Child Safety: What the Evidence Supports. National Conference on Child Abuse & Neglect, St. Louis, MO, April 1, 2003.

What's So Special About Specialized Foster Care? Foster Family Treatment Association's 16th Annual Conference, Chicago, Illinois, July 24, 2002.

Exploring the Field: What is Research Saying About Workforce Issues? CWLA Finding Better Ways Conference, St. Louis, Missouri, June 11, 2002.

"Turning Research into Meaningful Programs and Practices for Children and Families". Child Welfare League of America National Conference, Washington, DC, March 8, 2002.

"Self-efficacy Correlates of Judicial Rating of Child Welfare Caseworker Performance". Society for Social Work and Research, San Diego, California, January 18, 2002.

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Sue D. Steib, page 5

"Reframing Child Welfare and the Courts: A Statewide Study with Implications For Education and Practice". Ellett, A. and Steib, S. Paper presented at The Annual Program Meeting of the Council on Social Work Education, New York City, N.Y., February, 28, 2000.

"A Statewide Study of Child Welfare Practice and the Courts: Lessons Learned and Their Implications". Ellett, A. and Steib, S. Paper presented at The Society for Social Work and Research Annual Conference, Charleston, S. C., January 30, 2000.

Academic Journal Publications

Blome, W.W. & Steib, S. (in press). Strategies for empowering the child welfare administrator facing class action litigation. *Journal of Public Child Welfare.*

Blome, W.W. & Steib, S. (2004). Whatever the problem, the answer is "evidence-based practice" – or is it? *Child Welfare, 83*(6), 611-615.

Blome, W.W. & Steib, S. (2004). Like musical chairs? Become a child welfare worker. *Child Welfare, 83*(4), 381-384.

Ellett, A.S. & Steib, S. (2005). Child welfare and the courts: A statewide study with implications for professional education and practice. *Research in Social Work Practice, 15*(5), 339-352.

Steib, S. & Blome, W.W. (2004). Fatal error: The missing ingredient in child welfare reform, part II. *Child Welfare, 83*(1).

Steib, S. & Blome, W.W. (2003). Fatal error: The missing ingredient in child welfare reform, part I. *Child Welfare, 82*(6) , 747-750.

Appendix E

Charlene Ingram, MSW
49 Aberdeen Drive
Erial, New Jersey 08081

EDUCATION

MSW	1974	University of Pennsylvania, School of Social Work
BA	1965	Bennett College, Greensboro, North Carolina

EMPLOYMENT EXPERIENCE

1997 to present   **Senior Consultant, Child Welfare League of America**, providing consultation and technical assistance to public agencies and governmental bodies in a broad range of child welfare program and management areas, specializing in review and analysis of program process and procedures. Project responsibilities have included:

Evaluation of child welfare systems; Alameda County, California, Board of Supervisors.

Development of child welfare practice standards; State of Pennsylvania Department of Public Welfare;

Technical assistance for Child and Family Service Review statewide assessment, Pennsylvania Department of Public Welfare,

Consultation to litigation team, Georgia Department of Family and Children Services

Review of child welfare programs, Westchester County, New York,

Technical assistance for kinship care policy development, Saskatchewan, Canada, Department of Social Services, Family and Youth Services Division

Review of child welfare policies and practice; Somerset County, Pennsylvania, Department of Social Services;

Training for county social services staff in preparation for implementation of New York's SACWIS system for Andersen Consulting;

Review of child protective service and practices in Montgomery County, Maryland, Department of Social Services;

Development of Kinship Care standards and practice materials for the Child Welfare League of America.

1995–1997   **Social Work Administrator**, Philadelphia Department of Human Services, Children and Youth Division.   Plan and coordinate community and family foster home development activities to facilitate child welfare reform through the Family to Family Initiative (national effort supported by the Annie E Casey Foundation); lead responsibility for building collaborative partnerships with nine private child welfare service providers; project manager for funding to private providers implementing Family to Family reforms; chair the Family to Family Steering Committee made-up of private child welfare provider mid-level managers; administrative responsibility for a staff of eleven social workers and two supervisors.

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1990 - 94	Administered social service delivery to families through three supervisors and seventeen social workers whose responsibilities included the assessment and service planning for families experiencing child abuse and neglect issues.

Responsible for the administration of the in-house foster care program, which included the recruitment, and retention of foster families, training program development, and the monitoring of foster homes for regulatory compliance issues and family service plan requirements. Provided direction and guidance for three first line supervisors who oversaw the direct service provided to foster families by fifteen social workers.

Directed Juvenile Court related activities through two supervisors responsible for twelve social workers and two support staff. Formulated and coordinated court procedures with city solicitors and court personnel; trained new staff on court procedures and case responsibilities.

1981 - 90	**Social Work Supervisor**, Philadelphia Department of Human Services, Children and Youth Division. Coordinated Juvenile Court activities for social service staff; consulted with City Solicitors on Juvenile Court procedures; served as a liaison between Juvenile Court personnel and Department staff concerning problem issues. Supervised a unit of five social workers who performed assessment and planning for new cases.
1969 - 81	**Social Worker**, Philadelphia Department of Human Services, Children and Youth Division. Represented the agency at the Bar of Court in Delinquent and Dependent Courts; prepared referrals made by judges and probation officers; worked directly with children in foster care and their foster parents; executed initial intake of new families referred for services, investigated reports of abuse and neglect.
1967 - 79	**Mental Health Worker**, Philadelphia State Hospital. Screened patients for participation in a group program; designed and developed activity programs for chronic institutionalized patients, coordinated discharge planning with the social service department, conducted counseling groups.

ORGANIZATIONS – AWARDS

Nominated for the 1993 Greater Philadelphia First Public Management Award

PUBLICATIONS

Ingram, C. (1996). Kinship Care: From Last Resort to First Choice. Child Welfare, Vol. LXXXV (5) pp.

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